



WHAT TO  
EXPECT FROM A  
COLONOSCOPY



## WHAT IS A COLONOSCOPY?

A colonoscopy is a procedure (test) using a scope and video that lets your doctor examine the lining of your colon and rectum.

A colonoscopy can detect polyps (abnormal or precancerous growths on the lining of the colon or rectum), early cancers and other conditions, such as inflammation. Polyps are usually benign (not cancerous). Removal of polyps, which usually can be done during a colonoscopy, can prevent colorectal cancer.

A colonoscopy is an outpatient screening test usually performed at a hospital or a surgery center.

## WHAT HAPPENS BEFORE THE TEST?

Your doctor will tell you what foods you can and cannot eat before you take the test. Your doctor will also ask you to clean out your colon and rectum the day before by drinking a special cleansing liquid and/or by taking oral laxatives. The colon and rectum must be completely clean for the test to be accurate, so be sure to follow your doctor's instructions carefully.

You must tell your doctor about medications you are taking. You may be asked to stop taking some of your medications several days before the test.

## WHAT HAPPENS DURING THE TEST?

A colonoscopy rarely causes much pain. You might feel pressure, bloating or cramping during the test. You doctor will either do the procedure under a light

anesthesia or will give you a combination of a pain medication and a sedative to help you relax and, sometimes, make you fall asleep.

You will be wearing a hospital gown and will lie on your side. Your doctor may put some air into your anus to help view the colon and rectum. Then, your doctor will slowly move the tube, called a colonoscope, into your anus and through your colon.

A picture of your colon and rectum appears on a monitor so that your doctor can see if you have any problems. Your doctor will carefully examine the lining of your colon and rectum as the colonoscope moves through your colon and again as it is slowly removed.

The test can take from 15 to 90 minutes, but the average time is 15 to 30 minutes. Plan on two to three hours total for waiting, preparing and recovery. If the entire colon, for some reason, cannot be visualized, your doctor may recommend to try the procedure at a later date with better bowel preparation, or may decide to order an X-ray of the colon (CT colonography or contrast enema).

## WHAT HAPPENS AFTER THE TEST?

Your doctor will explain the results of the test to you. You will probably have to wait several days for the results of a biopsy, if one was performed.

Immediately after the test, you will be allowed time to recover before going home. If you have been given anesthesia or sedatives, someone must drive you home and stay with you. Even if you feel awake and alert, your ability to make decisions and your body's reflexes may not work as they normally would for the rest of that day. You might have some cramping or bloating because of the air put into the colon during the test. This should disappear quickly when you pass gas.

You should be able to eat a light meal after the examination, but there may be foods your doctor will ask you to avoid. Your doctor may also tell you to avoid some of your normal activities, especially after having polyps removed.

## WHAT ARE POSSIBLE COMPLICATIONS?

Although a colonoscopy with interventions, such as polypectomy, are generally safe procedures, complications can sometimes occur. These include

perforation, bleeding or inability to detect a lesion if it is covered with stool or hiding behind a fold.

You may have cancer or a polyp, but the colonoscopy may not find it.

The results of the biopsy may not help make a diagnosis. You may need additional biopsies or procedures.

Abnormal tissue may not have been completely removed.

A perforation is a puncture or rupture of the colon wall with spreading infection in the abdominal cavity. This is rare, but may require abdominal surgery.

After a biopsy or a polyp removal, a hemorrhage (heavy bleeding) may result, which sometimes requires a blood transfusion or reinsertion of the colonoscope to control the bleeding.

Other potential complications are reactions to the anesthetics and sedatives used, localized irritation to the vein where medication was injected (leaving a tender lump that may last a few days, but eventually goes away), or complications from heart or lung disease. Warm towels or moist packs often help relieve the discomfort of an irritated vein.

While these complications are rare, it is important to know the warning signs. Call your doctor if you notice very bad pain, fever and chills, rectal bleeding of more than a quarter of a cup (more than 2 oz), black tarry stools, coughing, shortness of breath, chest pain, or severe nausea or vomiting. Bleeding can occur several days after the removal of a polyp.

## ARE THERE ALTERNATIVES TO COLONOSCOPY?

Colonoscopy is the best test available to detect and treat abnormalities within the colon. The alternatives to colonoscopy are limited:

- You may choose not to have this procedure or any test at all.
- Computed tomography (CT), or a virtual colonoscopy, is a special CT scan where you must do a bowel cleansing the day before. During the exam, the colon is filled with air. A colonoscopy may be necessary to clarify specific findings.
- Barium enema involves placing contrast dye into your rectum to make it easier to see on the X-ray.

The test is less accurate and may miss lesions more often than a colonoscopy. A colonoscopy may be necessary to clarify specific findings.

- Flexible sigmoidoscopy is like a colonoscopy, but is limited to the last 2 feet of the large intestine. It is not as complete as a colonoscopy and may miss lesions that are located deeper than that.
- Stool tests are much less likely to find a lesion, and they are not specific enough to distinguish between a cancerous and a noncancerous cause. A colonoscopy may be necessary to clarify specific findings.



Be sure to discuss any specific concerns you may have about the procedure with your doctor.

**Call Nursing Triage Call Center if you have:**

- A temperature of 101 F (38.3 C) or higher, chills
- Severe stomach pain or increasing size and firmness of your abdomen
- Heavy bleeding from your rectum of more than 2 oz or that lasts more than 24 hours
- Black tarry stool
- Weakness, faintness or severe nausea/vomiting
- Shortness of breath
- Chest pain

**Call 626-218-7133**

A registered nurse is available 24 hours a day to answer questions for non-life-threatening health problems. Please have your medical record number when you call.

To learn more about colon cancer and colonoscopy, visit:

[CityofHope.org/clinical-program/colorectal-cancer/colorectal-cancer-tests](http://CityofHope.org/clinical-program/colorectal-cancer/colorectal-cancer-tests) or [preventcancer.org/colorectal](http://preventcancer.org/colorectal).

**For more information, call City of Hope:**

Division of Gastroenterology: **626-256-HOPE (4673)**, ext. 62033

Division of Colorectal Surgery: **626-256-HOPE (4673)** or **626-218-4052**

*"What to Expect When Having a Colonoscopy Brochure Readability Assessment"*  
checked by Health Literacy Advisor (Build 6413)

Flesch-Kincaid Grade: 8.9

Flesch Reading Ease Score: 62.4 (Standard - Grade 7-8)



**You can also scan the QR code to visit City of Hope's website.**

To scan, open the camera on your smartphone (iPhone or Android) and point it to the code.

A message will pop up with "Open [www.cityofhope.org](http://www.cityofhope.org)."  
Click on the message to open the website.



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